PATENT APPLICATION FEE DETERMINATION RECORD Effective October 1, 2004 10/61943 Z												
(Column 2) TYPE OS SKA									R THAN ENTITY			
T	OTAL CLAIM	S			<u> </u>		·	RATE	FEE	٦ ```	RATE	FEE
FOR			NUMBE	NUMBER FILED		NUMBER EXTRA		BASIC FI	EE 395.00	OR	BASIC FE	
TO	OTAL CHARGE	m	minus 20=				X\$ 25:		OR	X501=		
INDEPENDENT CLAIMS			minus 3 =		•	•		×ω=		┪┈	7100	
Asi	JLTIPLE DEFE	NDENT CLAIM I	PRESENT	•						JOR		+
* If the difference in column 1 is less than zero, enter *0" in column 2 CLAIMS AS AMENDED - PART II								+150=		OR	ــــ ــــــــــــــــــــــــــــــــ	
								TOTAL	٠ ــــــــــــــــــــــــــــــــــــ	JOR	TOTAL	<u> </u>
سندو		(Column 1)	AIRILIADE:	(Colun	nn 2)	(Column 3)	•	SMALL	ENTITY	OR		THAN ENTITY
AMENDMENTA	111/05	CLAIMS REMAINING AFTER AMENDMENT		HIGH NUME PREVIO PAID I	BER BUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
NON	Total	-21	Minus	-20)	=		x₺⊨		OR	X\$50=	5000
AME	Independent	1. 3	Minus	3		=	·	X140		OR	X200=	
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM					لـــلـــا	ľ	+150=		OR	+300 =	
					•		L	TOTAL		4 1	TOTAL ADDIT, FEE	500
		(Column 1)		(Colum	n 21	(Celumn 3)	^	JUII, FEE		.1 /	RUUTI. FEE	
AMENDMENT B	·	CLAIMS REMAINING AFTER AMENDMENT		HIGHE NUME PAEVIO PAID F	ER USLY	PRESENT EXTRA		RATE,	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
NON	Total	*	Minus	**		=		X.15 =		OR	XS(5=	
ME	Independent	dependent & Minus AND RST PRESENTATION OF MULTIPLE DEPENDE		1		=	i.	X 100=	<u> </u>	OR	X 200 =	
	FIRST PRESE	ENTATION OF MI	JUTIPLE DE	PENDENT		7	.160			12/5		
	2			•		7,20	L	+150=		OR	+300=	
						-	A	DOTT. FEE	<u> </u>	OR,	ODIT. FEE	<u></u>
-		(Column 1) CLAIMS		(Colum HIGHE		(Column 3)			· · · · · · · · · · · · · · · · · · ·			
AMENDMENT C		REMAINING AFTER · AMENDMENT		NUMBI PREVIOL PAID F	ER JSLY	PREȘENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL ,FEE
≥ 0 2	Total	*	Minus ·	##		£		X25=		OR	X\$50=	· ····
¥ .	Independent		Minus	***		ŗ.	-	×100 =		F	X200:	•
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM									OR .		 .
• #	the entry in colur	nn 1 is less than th	e entry in cobe	mn 2. write 3	min 🗠	ma 3	L	+150=		OR	+300=	
H	the Highest Nur	mber Previously Pa mber Previously Pa	id Foc IN THE	S SPACE is I	ace than	20 enter "20."	AD	TOTAL OIT. FEE		OR A	TOTAL DOTT, FEE	
1	he Highest Num	ber Previously Paid	For (Total or	Independen	4 is the	highest rimst er	lound	in the app	propriate box	in colu	ma.1	•

FORM PTO-175 (Rev.-10/04)

Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

Application or Docket Number